



**FILE COPY**

**Secretary of State**

**Elections Division**

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January 16, 2004

U.S. General Services Administration

Attention: Deborah J. Schilling

Director of Budget

1800 F Street, NW

Washington, DC 20405-0002

Facsimile: 202-501-1124

Re: Expenditure Reports for Title I -- Section 101 and 102 Funding

Dear Ms. Schilling:

As required by the Help America Vote Act of 2002 (hereinafter "HAVA"), and pursuant to the distribution directive sent out by the General Services Administration, on July 28, 2003, please find enclosed the State of Georgia's first report of expenditures of Title I, Section 101 and Section 102 funds for the December 31, 2003 reporting period.

As required by the directive, we are enclosing a separate reporting form 269 for Section 101 and 102 expenditures.

If we can provide you with any additional information, please contact me at 404-657-5352.

Sincerely

A handwritten signature in black ink, appearing to read "Clifford D. Tatum", followed by a horizontal line.

Clifford D. Tatum, Assistant Director  
Legal Affairs - Elections Division

Enclosures

**FINANCIAL STATUS REPORT**  
(Short Form)  
(Follow instructions on the back)

**ORIGINAL**

<b>1. Federal Agency and Organizational Element to Which Report is Submitted</b> General Services Administration/HAVA 1800 F. Street Washington, DC 20405-0002		<b>2. Federal Grant or Other Identifying Number Assigned By Federal Agency</b>  <div align="center" style="font-size: 1.2em;">Section 102</div>		<b>OMB Approval No.</b> 0348-0039	<b>Page</b> 1 <b>of</b> 1 <b>pages</b>
<b>3. Recipient Organization (Name and complete address, including ZIP code)</b> Georgia Secretary of State 214 State Capitol Atlanta, Georgia 30334					
<b>4. Employer Identification Number</b> <div style="background-color: black; width: 100px; height: 1.2em;"></div>	<b>5. Recipient Account Number or Identifying Number</b> <div style="background-color: black; width: 100px; height: 1.2em;"></div>	<b>6. Final Report</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>7. Basis</b> <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual		
<b>8. Funding/Grant Period (See Instructions)</b> From: (Month, Day, Year) n/a To: (Month, Day, Year) n/a		<b>9. Period Covered by this Report</b> From: (Month, Day, Year) 4/1/2003 To: (Month, Day, Year) 12/31/2003			
<b>10. Transactions</b>		I Previously Reported	II This Period	III Cumulative	
a. Total outlays		0.00	4,740,448.00	4,740,448.00	
b. Recipient share of outlays		0.00	0.00	0.00	
c. Federal share of outlays		0.00	4,740,448.00	4,740,448.00	
d. Total unliquidated obligations				0.00	
e. Recipient share of unliquidated obligations				0.00	
f. Federal share of unliquidated obligations				0.00	
g. Total Federal share (Sum of lines c and f)				4,740,448.00	
h. Total Federal funds authorized for this funding period				4,740,448.00	
i. Unobligated balance of Federal funds (Line h minus line g)				0.00	
<b>11. Indirect Expense</b>	<b>a. Type of Rate (Place "X" in appropriate box)</b> <input type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed				
	<b>b. Rate</b>	<b>c. Base</b>	<b>d. Total Amount</b>	<b>e. Federal Share</b>	
<b>12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.</b>  					
<b>13. Certification: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.</b>					
Typed or Printed Name and Title Media Osayi, Accounting Manager			Telephone (Area code, number and extension) (404)463-0719		
Signature of Authorized Certifying Official 			Date Report Submitted 1/16/2004		